#### **Supplemental Application Data Sheet**

### **Application Information**

Application number:: 10/553,904

10/21/2005 Filing Date::

Regular **Application Type::** Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Computer Readable Form (CRF)?::

Number of copies of CRF:: METHOD FOR IDENTIFYING AN ANTI-

STREPTOCOCCAL AGENT AND ITS USE FOR

TREATING STREPTOCOCCAL INFECTIONS

053694-0131 **Attorney Docket Number::** 

No Request for Early Publication?::

No Request for Non-Publication?::

Suggested Drawing Figure::

Title::

6 **Total Drawing Sheets::** 

**Small Entity?::** No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

**Applicant Authority Type::** Inventor

Sweden Primary Citizenship Country::

**Full Capacity** Status::

Given Name:: Lars

**BJÖRCK** Family Name::

Lund City of Residence::

Country of Residence:: Sweden Street of mailing address:: Magle Stora Kyrkogata 10

SE-22350 Lund

Country of mailing address:: Sweden

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Heiko

Family Name:: HERWALD

City of Residence:: Veberöd

Country of Residence:: Sweden

Street of mailing address:: Kyrkogatan 8

SE-24014 Veberöd

Country of mailing address:: Sweden

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Sweden

Status:: Full Capacity

Given Name:: Matthias

Family Name:: MÖRGELIN

City of Residence:: Lund
Country of Residence:: Sweden

Street of mailing address:: Tre Högars Väg 26b

SE-22475 Lund

Country of mailing address:: Sweden

**Applicant Authority Type::** Inventor

Primary Citizenship Country:: Great Britain

Status:: Full Capacity

Given Name:: Wayne

Family Name:: RUSSELL

City of Residence:: Kävlinge

Country of Residence:: Sweden

Street of mailing address:: Hallandsgatan 7

SE-22432 Kävlinge

Country of mailing address:: Sweden

Inventor **Applicant Authority Type::** 

Sweden **Primary Citizenship Country::** 

**Full Capacity** Status::

Anna Given Name::

**NORRBY-TEGLUND** Family Name::

Rönninge City of Residence:: Sweden Country of Residence::

Gustavslundsvägen 19 Street of mailing address::

SE-14463 Rönninge

Sweden Country of mailing address::

Applicant Authority Type:: Inventor Sweden **Primary Citizenship Country::** 

Status:: **Full Capacity** 

Given Name:: Lennart

LINDBOM Family Name::

City of Residence:: Sweden Country of Residence::

Department of Physiology and Pharmacology Street of mailing address::

Stockholm

Karolinska Institutet

SE-17177 Stockholm

Sweden Country of mailing address::

Inventor **Applicant Authority Type::** Sweden Primary Citizenship Country::

**Full Capacity** Status::

Ulla Given Name::

**SOLLENBERG** Family Name::

Stockholm City of Residence::

Sweden Country of Residence::

Department of Physiology and Pharmacology Street of mailing address::

> Karolinska Institutet SE-17177 Stockholm

Sweden Country of mailing address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

**Full Capacity** 

Given Name::

Henning

Family Name::

**CRAMER** 

City of Residence::

Frankfurt

**Country of Residence::** 

Germany

Street of mailing address::

Ludwigsharener Strasse 50

DE-65929 Frankfurt

Country of mailing address::

Germany

**Applicant Authority Type::** 

Inventor

**Primary Citizenship Country::** 

Denmark

Status::

**Full Capacity** 

Given Name::

Hans

Family Name::

**FLODGAARD** 

City of Residence::

Hellerup

Country of Residence::

Denmark

Street of mailing address::

Melvillevej 6

DK-2900 Hellerup

Country of mailing address::

Denmark

## **Correspondence Information**

**Correspondence Customer Number::** 

22428

E-Mail address::

PTOMailWashington@foley.com

### **Representative Information**

Representative Customer Number::	22428	!

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/EP2004/004429	4/23/2004

# **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
Great Britain	0309246.7	4/23/2003	Yes
Great Britain	0329112.7	12/16/2003	Yes

# **Assignee Information**

Assignee Name::

HANSA MEDICAL AB